PTC/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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	PAT	ENT APPLI	CATIO Substi	RECORD	Oneson una	unisss it displays a valid OMB control number. Application or Doctet Number					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR		NUMB	ABER FILED NUM		ER EXTRA		RATE	FEE]	RATE	666
(37	SIC FEE CFR I.18(a))					1		\$	OR	·	FEE
TOTAL CLAIMS (37 CFR 1.18(c))			minus 20 =			1	X S =		1		'
INDEPENDENT CLAIMS (37 CFR 1.18(b))		MS	minus 3 = ·						OR	× s	
				1	× \$		OR	× s			
							+3	 	OR	+5=	
"If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	L	
7/10 CLAIMS AS AMENDED - PART II											
	, 	(Column 1)	,	(Column 2)	(Column 3)	•	SMALL I	NTITY	OR		R THAN ENTITY
AMENDMENT &	B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		· RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1,18(c))	. 9	Minus	<i>"20</i>	. =		x s =		OR.	xs =	
AEN	Independent (37 CFR 1;16(b))	2	Minus	"3	•		x \$a		ÓR	x s=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							_	OR	+5 =	
Car						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)							•			•	
AMENDMENT B	9006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDÍ- TIONAL FEE
M	Total (37 CFR 1.16(c))	2	Minus	20	•		x \$. =		OR	xs =	
EN	Independent (37 CFR 1.16(b))	2	Minus	"3	•		x s =		OR	x s =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))							+3		OR		
							TOTAL ADD'L FEE		OR	+ \$ = TOTAL ADD'L FEE	
_		(Column 1)	_	(Cotumn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (SI CFR 1.16(c))	•	Minus	10	8		x \$		OR	x \$ -	1.66
	Independent (37 CFR 1,15(b))	•	euniM	***	8		X \$ =		OR .	x s_ =	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1, 18(d))						+5		OR	+:	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "30".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "30".

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.